

County: Clarendon

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
BRANCO ADULT DAYCARE CENTER LLC 238 COMMERCE ST MANNING, SC 29102 WITHERSPOON, ANGELA D PH#: 803-435-9780 Fac. Cont. Email:BRANACOAW@YAHOO.COM	ADC-0253 / 04/30/2009 Clarendon / Ltd. Liability 1215 SPORTSMAN DR MANNING, SC 29102 BRANCO ADULT DAYCARE CENTER LLC	53
Number of Participants		53

Totals For Facility/License Type Adult Day Care

Number of Activities/Facilities licensed:	1	Number Licensed Units	53
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County: Clarendon

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
CLARENDON COMMUNITY RESIDENTIAL CARE CENTER INC 3625 ALEX HARVIN HWY MANNING, SC 29102 FENNELL JR, CURTIS A PH#: 803-473-3504 Fac. Cont. Email: ALFENNEL@MSN.COM	CRC-0805 / 02/28/2009 (Renewal Pending) Clarendon / Corporation PO BOX 640 MANNING, SC 29102-0640 CLARENDON COMMUNITY RESIDENTIAL CARE CENTER INC	90
Certifications: None		
DORCH COMMUNITY RESIDENTIAL CARE 3955 GREELEYVILLE HWY MANNING, SC 29102 SCOTT, WILLA MAE PH#: Fac. Cont. Email: No Fac Cont. email on record	CRC-1078 / 04/30/2010 Clarendon / Partnership PO BOX 122 MANNING, SC 29102 EVELYN DORCH LEWIS AND ANDREW DORCH	13
Certifications: Alzheimer Care		
RAM BAY RESIDENTIAL CARE FACILITY 1380 WILLIAMS ACRES LN MANNING, SC 29102 WILLIAMS, EARTHA Y PH#: 803-473-2349 Fac. Cont. Email: No Fac Cont. email on record	CRC-1284 / 07/31/2008 (Renewal Pending) Clarendon / Sole Proprietorship PO BOX 383 MANNING, SC 29102 EARTHA Y WILLIAMS	5
Certifications: Alzheimer Care		
VANGUARD RESIDENTIAL SERVICES I 100 E HOSPITAL ST MANNING, SC 29102 RILEY, ROSALYN E PH#: 803-435-2330 Fac. Cont. Email: CCDSN@YAHOO.COM	CRC-1313 / 06/30/2009 Clarendon / Non-Profit Corporation PO BOX 40 MANNING, SC 29102 VANGUARD RESIDENTIAL SERVICES INC	8
Certifications: None		
VANGUARD RESIDENTIAL SERVICES II 512 S CHURCH ST MANNING, SC 29102 RILEY, ROSALYN E PH#: 803-435-2330 Fac. Cont. Email: CCDSN@YAHOO.COM	CRC-1314 / 06/30/2009 Clarendon / Non-Profit Corporation PO BOX 40 MANNING, SC 29102 VANGUARD RESIDENTIAL SERVICES INC	8
Certifications: None		

Totals For Facility/License Type Community Residential Care Facility

Number of Activities/Facilities licensed: 5 Number Licensed Units 124

County: Clarendon

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
CLARENDON MEMORIAL HOME HEALTH 23 S MILL ST MANNING, SC 29102 CARTRIGHT, REBECCA F PH#: 803-435-4494 Fac. Cont. Email:RCARTWRIGHT@CLARENDONHEALTH.COM	HHA-0141 / 01/31/2010 Clarendon / Non-Profit Corporation 23 S MILL ST MANNING, SC 29102 CLARENDON HOSPITAL DISTRICT	1
Counties Served Clarendon License Restrictions Physical Therapy Y Speech Therapy:N Occupational Therapy Y Med. Social Services Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N Other:		

Totals For Facility/License Type Home Health

Number of Activities/Facilities licensed:	1	Number Licensed Units	1
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Division of Health Licensing

County: Clarendon

Facility Type: Hospital or Institutional General Infirmary

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	
CLARENDON MEMORIAL HOSPITAL	HTL-0012 / 07/31/2009	56
10 HOSPITAL ST	Clarendon / Non-Profit Corporation	
MANNING, SC 29102-0550	PO BOX 550	
FRYE, EDWARD R PH#: 803-435-8463	MANNING, SC 29102-0550	
Fac. Cont. Email: NDAVIS@CLARENDONHEALTH.COM	CLARENDON HOSPITAL DISTRICT	
Licensed Beds: General: 56 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: Perinatal Level I, JCAHO Accredited

TURBEVILLE CORRECTIONAL INSTITUTION INFIRMARY	HTL-0901 / 10/31/2009	8
1578 CLARENCE E COKER HWY	Clarendon / State	
TURBEVILLE, SC 29162	PO BOX 252	
HUGGINS, TINA BLAKELY PH#: 803-896-3161	TURBEVILLE, SC 29162	
Fac. Cont. Email: No Fac Cont. email on record	SC DEPT OF CORRECTIONS	
Licensed Beds: General: 8 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications: None

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed:
Number Licensed Units

County: Clarendon

Facility Type: Nursing Home

Facility Name	License Nbr/Expiration Date	Licensed Unit
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	

LAKE MARION NURSING FACILITY	NCF-0736 / 01/31/2010	88
1527 URBANA RD	Clarendon / Non-Profit Corporation	
SUMMERTON, SC 29148	PO BOX 1159	
MCLEOD, MARY W PH#: 803-485-2317	SUMMERTON, SC 29148	
Fac. Cont. Email:LMCLEOD@CLARENDONHEALTH.COM	CLARENDON HOSPITAL DISTRICT	

Licensed Beds	Nursing Home	88	Institutional Nursing Home	0
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Certifications:None

WINDSOR MANOR	NCF-0737 / 01/31/2009 (Renewal Pending)	64
5583 SUMMERTON HWY	Clarendon / Non-Profit Corporation	
MANNING, SC 29102	PO BOX 1230	
MILES, ANETTE C PH#: 803-478-2323	SUMMERTON, SC 29148-1230	
Fac. Cont. Email:AMILES@CLARENDONHEALTH.COM	CLARENDON HOSPITAL DISTRICT	

Licensed Beds	Nursing Home	64	Institutional Nursing Home	0
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Certifications:None

Totals For Facility/License Type Nursing Home

Number of Activities/Facilities licensed:	2	Number Licensed Units	152
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County: Clarendon

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
CLARENDON BEHAVIORAL HEALTH SERVICES 14 N CHURCH ST MANNING, SC 29102 KIRVEN, ARVILLA A PH#: 803-435-2121 Fac. Cont. Email:CCCADA@CLARENDONBHS.COM	OTP-0048 / 02/28/2010 Clarendon / County PO BOX 430 MANNING, SC 29102-0430 CLARENDON COUNTY COMMISSION ON ADA	1

Certifications:None

Totals For Facility/License Type PSAD Outpatient

Number of Activities/Facilities licensed:	1	Number Licensed Units	1
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County: Clarendon

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Address Licensee	Licensed Unit
FMC DIALYSIS SERVICES LAKE MARION 20 BUFF BLVD SUMMERTON, SC 29148 LEA, SUSAN PH#: 803-485-2341 Fac. Cont. Email: No Fac Cont. email on record	ERD-0099 / 02/28/2010 Clarendon / Corporation 20 BUFF BLVD SUMMERTON, SC 29148 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC	13
Licensed Stations: Hemodialysis: 13 Peritoneal: 0		
FRESENIUS MEDICAL CARE MANNING 3107 SUMTER HWY MANNING, SC 29102 BLACKWELL, CHERYL PH#: 803-435-4428 Fac. Cont. Email: No Fac Cont. email on record	ERD-0181 / 06/30/2009 Clarendon / Corporation 3107 SUMTER HWY MANNING, SC 29102 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC	21
Licensed Stations: Hemodialysis: 21 Peritoneal: 0		

Totals For Facility/License Type Renal Dialysis

Number of Activities/Facilities licensed: 2 Number Licensed Units 34

County: Clarendon

Facility Type: Residential Treatment for Children & Adolescents

Facility Name	License Nbr/Expiration Date	
Location Street	County/Ownership Typ	
Location City, State	Mailing/Billing Address	
Administrator/Phone	Licensee	Licensed Unit

WILLOWGLEN ACADEMY SOUTH CAROLINA	RTF-0023 / 03/31/2010	40
1399 HARMONY CAMP RD	Clarendon / Corporation	
GREELEYVILLE, SC 29056	1399 HARMONY CAMP RD	
DRAKE RN, MELINDA G PH#: 803-473-4656	GREELEYVILLE, SC 29056	
Fac. Cont. Email: MELINDAD@WILLOWLGENSE.COM	WILLOWGLEN ACADEMY - SOUTH CAROLINA INC	

Totals For Facility/License Type Residential Treatment for Children & Adolescents

Number of Activities/Facilities licensed:	1	Number Licensed Units	40
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Number of Activities/Facilities licensed in county of	Clarendon	# Lics	15
	Number Licensed Units :	469	

Report Total

Total Number of Activities/Facilities licensed	15	Total Number Licensed Units	469
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